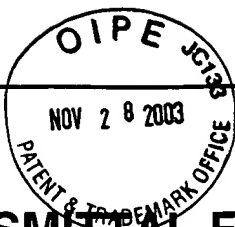


Op 28725

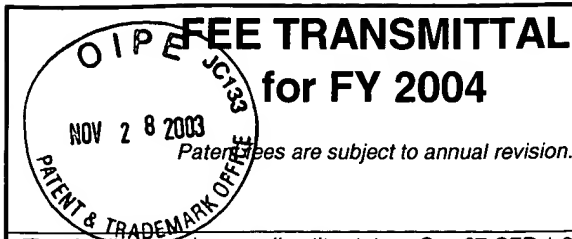


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DEC 8 9 2003
TC 1700

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/427,457	
	Filing Date	16 Oct 1999	
	First Named Inventor	Geoff P. Andersen	
	Group Art Unit	2872	
	Examiner Name	A. Chang	
Total Number of Pages in this Submission	12	Attorney Docket Number	AFB00497

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to a TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks		RECEIVED DEC 11 2003 TECHNOLOGY CENTER 2800
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm or Individual Name	THOMAS C. STOVER, REG NO. 22,531	
Signature	<i>Thomas C. Stover</i>	
Date	24 November 2003	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	THOMAS C. STOVER	
Signature	<i>Thomas C. Stover</i>	Date
		24 November 2003



☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 110.00
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METHOD OF PAYMENT

☐ Check ☐ Credit ☐ Money ☐ Other ☐ None
☒ Deposit Account card Order

Deposit Account Number: AF 01-0465

Deposit Account Name: Department of the Air Force

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, **except for the filing fee** to the above-identified deposit account

FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid		
Code (\$)	Code (\$)				
1001 770	2001 385	Utility Filing Fee			
1002 340	2002 170	Design Filing Fee			
1003 530	2003 265	Plant Filing Fee			
1004 770	2004 385	Reissue Filing Fee			
1005 160	2005 80	Provisional Filing Fee			
SUBTOTAL (1)			\$ 0.00		

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims	- 20** =	Extra Claims	Fee from below	Fee Paid	
Indep. Claims	- 3** =				
Multiple Dependent					
Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid		
Code (\$)	Code (\$)				
1202 18	2202 9	Claims in excess of 20			
1201 86	2201 43	Independent claims in excess of 3			
1203 290	2203 145	Multiple dependent claim, if not paid			
1204 86	2204 43	**Reissue independent claims over original patent			
1205 18	2205 9	**Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)			\$ 0.00		

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Typed or Printed Name	<u>JULIAN L. SIEGEL</u>	Registration. No.	
Signature			
Typed or Printed Name		Registration. No.	
Signature			

Complete if Known

Application Number	09/427,457
Filing Date	16 Oct 1999
First Named Inventor	Geoff P. Andersen
Examiner Name	A. Chang
Group Art Unit	2872
Attorney Docket Number	AFB00497

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner Action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110.00
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)				\$ 110.00	

Complete (if applicable)

Typed or Printed Name	<u>JULIAN L. SIEGEL</u>	Registration. No.	<u>22,407</u>	Telephone	<u>(781) 377-4072</u>
Signature				Date	<u>24 November 2003</u>
Typed or Printed Name		Registration. No.		Telephone	
Signature				Date	